

JC13 Rec'd PCT/PTO 22 APR 2005

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	FREQUENCY MULTIBAND ANTENNA WITH PHOTONIC BANDGAP MATERIAL
Attorney Docket Number::	0512-1275
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	5
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: MARC
Middle Name::
Family Name:: THEVENOT
Name Suffix::
City of Residence:: PEYRILHAC
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: PLACE DE LA MAIRIE
City of Mailing Address:: PEYRILHAC
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 87510

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: REGIS
Middle Name::
Family Name:: CHANTALAT
Name Suffix::
City of Residence:: LIMOGES
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 10, RUE JEAN POUYAT
City of Mailing Address:: LIMOGES

State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 87000

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: BERNARD
Middle Name::
Family Name:: JECKO
Name Suffix::
City of Residence:: RILHAC-RANCON
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing
Address:: 4, RUE JEAN ROSTAND
City of Mailing Address:: RILHAC-RANCON
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 87570

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: LUDOVIC
Middle Name::
Family Name:: LEGER
Name Suffix::
City of Residence:: LIMOGES
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 19, RUE DU CLOS AUGIER

Address::

City of Mailing Address:: LIMOGES

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 87100

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: THIERRY

Middle Name::

Family Name:: MONEDIERE

Name Suffix::

City of Residence:: LIMOGES

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing Address:: 6, RUE EMILE DE GIRARDIN

Address::

City of Mailing Address:: LIMOGES

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 87000

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: PATRICK

Middle Name::

Family Name:: DUMON

Name Suffix::

City of Residence:: VIGOULET-AUZIL

State or Province of

Residence::

Country of Residence:: FRANCE
 Street of Mailing 2, ALLEE DES BOIS
 Address::
 City of Mailing Address:: VIGOULET-AUZIL
 State or Province of Mailing Address::
 Country of Mailing Address:: FRANCE
 Postal or Zip Code of Mailing Address:: 31320

Correspondence Information

Correspondence Customer 00466
 Number::

Representative Information

Representative Customer	00466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR2003/003146	10/23/03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	02/13326	10/24/02	Yes
FRANCE	03/09467	7/31/03	Yes

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::